

13

tebral fusion cage inserter **256** and of how it couples to and releases the intervertebral fusion cage **258** are shown in FIG. **28**.

The terms and expressions employed herein are used as terms and expressions of description and not of limitation, and there is no intention, in the use of such terms and expressions, of excluding any equivalents of the features shown and described or portions thereof. In addition, having described certain embodiments of the invention, it will be apparent to those of ordinary skill in the art that other embodiments incorporating the concepts disclosed herein may be used without departing from the spirit and scope of the invention. Accordingly, the described embodiments are to be considered in all respects as only illustrative and not restrictive. Furthermore, the configurations described herein are intended as illustrative and in no way limiting. Similarly, although physical explanations have been provided for explanatory purposes, there is no intent to be bound by any particular theory or mechanism, or to limit the claims in accordance therewith.

INCORPORATION BY REFERENCE

The entire disclosures of each of the patent documents and scientific articles cited herein are incorporated by reference in their entirety for all purposes.

EQUIVALENTS

The invention may be embodied in other specific forms without departing from the spirit or essential characteristics thereof. The foregoing embodiments are therefore to be considered in all respects illustrative rather than limiting on the invention described herein. Scope of the invention is thus indicated by the appended claims rather than by the foregoing description, and all changes that come within the meaning and range of equivalency of the claims are intended to be embraced therein.

What is claimed is:

1. A method for accessing an intervertebral disc space in a body of a patient, the method comprising:

making an incision in a region of the patient's body that permits access to a psoas muscle;

directing a blade of a first dissecting retractor through the incision and such that a distal end of the first dissecting retractor blade is positioned proximate the intervertebral disc space; directing, independently of the first dissecting retractor blade, a blade of a second dissecting retractor through the incision and such that a distal end of the second dissecting retractor blade is positioned proximate the intervertebral disc space, the first and second dissecting retractor blades employed during their placement within the patient's body in a tissue dissection process to gain access to the intervertebral disc space; and

following the positioning of the distal ends of the first and second dissecting retractor blades proximate the intervertebral disc space, coupling the first and second dissecting retractors to one another.

2. The method of claim **1** further comprising manually palpating the psoas muscle subsequent to making the incision in the region of the patient's body.

14

3. The method of claim **1**, wherein directing the first dissecting retractor blade comprises directing the first dissecting retractor blade anterior to, or through, the psoas muscle.

4. The method of claim **1**, wherein directing the second dissecting retractor blade comprises positioning the second dissecting retractor blade posterior to the first dissecting retractor blade.

5. The method of claim **1**, wherein the first and second dissecting retractor blades are both directed to avoid a region in the psoas muscle comprising a lumbar plexus nerve group.

6. The method of claim **1**, wherein coupling the first and second dissecting retractors to one another comprises coupling a retractor stabilizing frame to both the first and second dissecting retractors.

7. The method of claim **6** further comprising removing a handle from each of the first and second dissecting retractors subsequent to coupling the retractor stabilizing frame to each of the first and second dissecting retractors.

8. The method of claim **6**, further comprising coupling a stabilizing arm to the retractor stabilizing frame and to a rigid structure.

9. The method of claim **8**, wherein the rigid structure comprises an operating table.

10. The method of claim **6**, wherein the retractor stabilizing frame comprises a translation mechanism for adjusting a spacing between the first and second dissecting retractor blades.

11. The method of claim **10** further comprising adjusting a size of a working channel defined within the patient's body by manipulating the translation mechanism.

12. The method of claim **1** further comprising directing third and fourth blades through the incision and such that distal ends of the third and fourth blades are positioned proximate the intervertebral disc space.

13. The method of claim **12**, wherein the third and fourth blades are both coupled to a blade stabilization frame.

14. The method of claim **13** further comprising coupling the blade stabilization frame to at least one of the first and second dissecting retractors.

15. The method of claim **13**, wherein the blade stabilization frame comprises a translation mechanism for adjusting a spacing between the third and fourth blades.

16. The method of claim **15** further comprising adjusting a size of a working channel defined within the patient's body by manipulating the translation mechanism.

17. The method of claim **1** further comprising directing a surgical instrument through the incision and to the intervertebral disc space.

18. The method of claim **17**, wherein the surgical instrument comprises an intervertebral fusion cage inserter.

19. The method of claim **1** further comprising delivering a surgical implant through the incision and to the intervertebral disc space.

20. The method of claim **19**, wherein the surgical implant comprises an intervertebral fusion cage.

21. The method of claim **1** further comprising targeting a desired surgical level and sizing lengths of the first and second dissecting retractor blades prior to making the incision.

22. The method of claim **21**, wherein a measurement caliper is employed to target the desired surgical level and size the lengths of the first and second dissecting retractor blades.

* * * * *